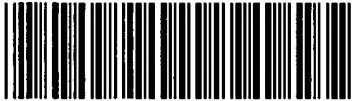



<b>Issue Classification</b> 	<b>Application/Control No.</b> 09/765,860	<b>Applicant(s)/Patent under Reexamination</b> FARAGO ET AL.
	<b>Examiner</b> Sy D. Luu	<b>Art Unit</b> 2174

ISSUE CLASSIFICATION																																																				
ORIGINAL						INTERNATIONAL CLASSIFICATION																																														
CLASS			SUBCLASS			CLAIMED			NON-CLAIMED																																											
715			700			G	06	F	3	/00																																										
<b>CROSS REFERENCES</b> <table border="1"> <tr> <th>CLASS</th> <th colspan="4">SUBCLASS (ONE SUBCLASS PER BLOCK)</th> </tr> <tr> <td>715</td> <td>867</td> <td></td> <td></td> <td></td> </tr> <tr> <td>702</td> <td>188</td> <td></td> <td></td> <td></td> </tr> <tr><td></td><td></td><td></td><td></td><td></td></tr> <tr><td></td><td></td><td></td><td></td><td></td></tr> <tr><td></td><td></td><td></td><td></td><td></td></tr> <tr><td></td><td></td><td></td><td></td><td></td></tr> <tr><td></td><td></td><td></td><td></td><td></td></tr> </table>						CLASS	SUBCLASS (ONE SUBCLASS PER BLOCK)				715	867				702	188																													G	06	F	15	/00		
CLASS	SUBCLASS (ONE SUBCLASS PER BLOCK)																																																			
715	867																																																			
702	188																																																			
											/																																									
											/																																									
											/																																									
											/																																									
											/																																									
											/																																									

(Assistant Examiner) (Date) 		SY D. LUU 10/16/2006 (Primary Examiner) (Date)		<b>Total Claims Allowed: 18</b>	
(Legal Instruments Examiner) (Date) 10-20-06				O.G. Print Claim(s) 1	
				O.G. Print Fig. 2	

<input checked="" type="checkbox"/> Claims renumbered in the same order as presented by applicant												<input type="checkbox"/> CPA		<input type="checkbox"/> T.D.		<input type="checkbox"/> R.1.47	
Final	Original	Final	Original	Final	Original	Final	Original	Final	Original	Final	Original	Final	Original	Final	Original		
	1		31		61		91		121		151		181		211		
	2		32		62		92		122		152		182		212		
	3		33		63		93		123		153		183		213		
	4		34		64		94		124		154		184		214		
	5		35		65		95		125		155		185		215		
	6		36		66		96		126		156		186		216		
	7		37		67		97		127		157		187		217		
	8		38		68		98		128		158		188		218		
	9		39		69		99		129		159		189		219		
	10		40		70		100		130		160		190		220		
	11		41		71		101		131		161		191		221		
	12		42		72		102		132		162		192		222		
	13		43		73		103		133		163		193		223		
	14		44		74		104		134		164		194		224		
	15		45		75		105		135		165		195		225		
	16		46		76		106		136		166		196		226		
	17		47		77		107		137		167		197		227		
	18		48		78		108		138		168		198		228		
	19		49		79		109		139		169		199		229		
	20		50		80		110		140		170		200		230		
	21		51		81		111		141		171		201		231		
	22		52		82		112		142		172		202		232		
	23		53		83		113		143		173		203		233		
	24		54		84		114		144		174		204		234		
	25		55		85		115		145		175		205		235		
	26		56		86		116		146		176		206		236		
	27		57		87		117		147		177		207		237		
	28		58		88		118		148		178		208		238		
	29		59		89		119		149		179		209		239		
	30		60		90		120		150		180		210		240		